PART B - FEE(S) TRANSMITTAL						
Complete od senat	his form, together with	h applicable f	ee(s), to: <u>M</u> or <u>F</u>	Commissioner (P.O. Box 1450 Alexandria, Vir	E FEE for Patents ginia 22313-1450	
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CURRENT CORRESPONDENC		Note: A certificate of Fee(s) Transmittal. I papers. Each addition have its own certification.	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
BLAKELY SOKOLOFF TAYLOR & ZAFMAN 12400 WILSHIRE BOULEVARD SEVENTH FLOOR LOS ANGELES, CA 90025-1030 07/26/2005 TBESHAH2 00000068 10039648				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. T. J. DELGADO (Depositor's name)		
01 FC:1501 02 FC:1504	1400.00 OP 300.00 OP				1/22/05	(Signature)
APPLICATION NO.	FILING DATE		FIRST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIDMATION NO
10/039,648	12/31/2001	Howard S. Dav			42390.P12981	CONFIRMATION NO. 9206
TITLE OF INVENTION: D	ISTRIBUTED MEMORY M	ODULE CACHE				
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	07/22/2005
EXAMINER		ART UNIT		CLASS-SUBCLASS		
LI, ZHUO H		2189		711-144000	_	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
INTEL CORPORATION SANTA CLARA, CALIFORNIA						
	assignee category or categor	ries (will not be pr	inted on the pa	atent): 🗖 Individual 🔏	Corporation or other private gr	oup entity Government
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):						
			A check in the amount of the fee(s) is enclosed.			
			Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2666 (enclose an extra copy of this form).			
			Deposit Acco	ount Number <u>02-2666</u>	(enclose an extra c	copy of this form).
	(from status indicated above MALL ENTITY status. See 3		b. Applica	ant is no longer claiming SM	ALL ENTITY status. See 37 C	FR 1.27(g)(2).
					isly paid issue fee to the applications agent; or t	
Authorized Signature Date 7/21/2005						
Typed or printed name	Registration No. <u>25, 129</u>					

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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